10/552727

JC05 Rec'd PCT/PTO 11 OCT 2005

APPLICATION DATA SHEET

Application Information

Application Number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	No
Number of Copies of CRF::	
Title::	METHOD AND APPARATUS TO CONTROL A SHIP
Attorney Docket Number::	034382-005
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	3
Small Entity?::	No
Latin Name::	

Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Finland
Status::	Full Capacity
Given Name::	Vesa
Middle Name::	
Family Name::	KORHONEN
Name Suffix::	
City of Residence::	Espoo
State or Province of Residence::	
Country of Residence::	Finland
Street of Mailing Address::	Joupintie 2 D 26
City of Mailing Address::	Espoo
State or Province of Mailing Address::	
Country of Mailing Address::	Finland
Postal or Zip Code of Mailing Address::	FI-02760

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Finland
Status::	Full Capacity
Given Name::	Risto
Middle Name::	
Family Name::	PAKASTE
Name Suffix::	
City of Residence::	Helsinki
State or Province of Residence::	
Country of Residence::	Finland
Street of Mailing Address::	Pikipolku 8 C
City of Mailing Address::	Helsinki
State or Province of Mailing Address::	
Country of Mailing Address::	Finland
Postal or Zip Code of Mailing Address::	FI-00670
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Finland
Status::	Full Capacity
Given Name::	Antti
Middle Name::	
Family Name::	RUOHONEN
Name Suffix::	

City of Residence:: Helsinki State or Province of Residence:: Country of Residence:: Finland Street of Mailing Address:: Niemenmäentie 6 A 10 City of Mailing Address:: Helsinki State or Province of Mailing Address:: Country of Mailing Address:: Finland Postal or Zip Code of Mailing FI-00350 Address:: Applicant Authority Type:: Inventor Primary Citizenship Country:: Finland Status:: Full Capacity Given Name:: Petri Middle Name:: Family Name:: SULLSTRÖM Name Suffix:: City of Residence:: Kirkkonummi State or Province of Residence:: Country of Residence:: Finland Street of Mailing Address:: Överbyntie 206

State or Province of Mailing Address::

City of Mailing Address::

Addiess.

Country of Mailing Address:: Finland

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Kirkkonummi

Address::	F1-02400	
Applicant Authority Type::	Inventor	
Primary Citizenship Country::	Finland	
Status::	Full Capacity	
Given Name::	Panu	
Middle Name::		
Family Name::	VIROLAINEN	
Name Suffix::		
City of Residence::	Espoo	
State or Province of Residence::		
Country of Residence::	Finland	
Street of Mailing Address::	lirislahdenportti 10 B	
City of Mailing Address::	Espoo	
State or Province of Mailing Address::		
Country of Mailing Address::	Finland	
Postal or Zip Code of Mailing Address::	FI-02230	
Applicant Authority Type::	Inventor	
Primary Citizenship Country::	Finland	
Status::	Full Capacity	
Given Name::	Petteri	·
Middle Name::		
Family Name::	ÄMMÄLÄ	
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Name Suffix::	
City of Residence::	Baden-Dättwil
State or Province of Residence::	
Country of Residence::	Switzerland
Street of Mailing Address::	Segelhofstrasse 36e
City of Mailing Address::	Baden-Dättwil
State or Province of Mailing Address::	
Country of Mailing Address::	Switzerland
Postal or Zip Code of Mailing Address::	CH-5405
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Finland
Status::	Full Capacity
Status:: Given Name::	Full Capacity Matti
Given Name::	
Given Name:: Middle Name::	Matti
Given Name:: Middle Name:: Family Name::	Matti
Given Name:: Middle Name:: Family Name:: Name Suffix::	Matti
Given Name:: Middle Name:: Family Name:: Name Suffix:: City of Residence::	Matti
Given Name:: Middle Name:: Family Name:: Name Suffix:: City of Residence:: State or Province of Residence::	Matti LEHTI Espoo
Given Name:: Middle Name:: Family Name:: Name Suffix:: City of Residence:: State or Province of Residence:: Country of Residence::	Matti LEHTI Espoo Finland

Country of Mailing Address::

Finland

Postal or Zip Code of Mailing

FI-02920

Address::

Correspondence Information

Correspondence Customer Number:: 21839

Phone Number::

(703) 836-6620

Fax Number:

(703) 836-2021

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

Application:: Continuity Type::

Parent Application::

Parent Filing

Date::

This Application

National Stage of

PCT/FI2004/000225

04/13/04

Foreign Priority Information

Country::

Application Number::

Filing Date::

Priority

Claimed::

Finland

20030556

04/11/03

Yes

Assignee Information

Assignee Name::

ABB OY

Street of Mailing Address::

Strömbergintie 1

City of Mailing Address::

Helsinki

State or Province of Mailing

Address::

Country of Mailing Address::

Finland

Postal or Zip Code of Mailing

FI-00380

Address::

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